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FACSIMILE COVER SHEET

TO:	Examiner Brian C. Genco Group Art Unit: 2615		
FROM:	Michael K. O'Neill		
RE:	U.S. Application No. 09/923,422 Our Ref.: 03500.015675		
FAX NO.:	(703) 872-9306		
DATE:	June 30, 2005	NO. OF PAGES:	23 (including cover page)
TIME:	3:45	SENT BY:	<i>[Signature]</i>

MESSAGE

Attached is a Amendment in response to the Office Action dated March 30, 2005, together with a computer-generated translation of Japan 11-151233.

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In re Application of:

OSAMU TSUJII, et al.

Application No.: 09/923,422

Filed: August 8, 2001

For: IMAGE SENSING APPARATUS

Docket No. 03500.015675

Examiner: Brian C. Genco

Group Art Unit: 2615

Date: June 30, 2005

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THE COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

☒ No additional fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	12	MINUS	** 20	= 0	x \$25 \$50	- 0 -
INDEP. CLAIMS	1	MINUS	*** 4	= 0	x \$100 \$200	- 0 -
Fee for Multiple Dependent claims \$180°/\$360						
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						- 0 -

* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

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- ☐ Verified Statement claiming small entity status is enclosed, if not filed previously.
- ☐ A check in the amount of \$_____ is enclosed.
- ☐ Charge \$_____ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.
- ☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.
- ☐ A check in the amount of \$_____ to cover the fee for a _____ month extension is enclosed.
- ☐ A check in the amount of \$_____ to cover the Information Disclosure Statement fee is enclosed.
- ☒ Applicants' undersigned attorney may be reached in our Costa Mesa, California office by telephone at (714) 540-8700. All correspondence should continue to be directed to our address given below.

Respectfully submitted,



Attorney for Applicants
Michael K. O'Neill
Registration No.: 32,622

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03500.015675.

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)	
	:	Examiner: Brian C. Genco
OSAMU TSUJII, et al.)	
	:	Group Art Unit: 2615
Application No.: 09/923,422)	
	:	
Filed: August 8, 2001)	
	:	
For: IMAGE SENSING)	
APPARATUS	:	June 30, 2005

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT
AND
STATEMENT OF SUMMARY OF INTERVIEW

Sir:

In response to the Office Action dated March 30, 2005, please amend the
above-identified application, as follows:

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June 30, 2005

Date

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